

## PART B - FEE(S) TRANSMITTAL

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Effective on 12/08/2004.

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

# FEE TRANSMITTAL

## For FY 2005

 Applicant claims small entity status. See 37 CFR 1.27

**TOTAL AMOUNT OF PAYMENT** (\$ 1,730.00)

**Complete if Known**

Application Number	10/000,460-Conf. #2302
Filing Date	November 30, 2001
First Named Inventor	Masajiro INOUE
Examiner Name	M. Colaianni
Art Unit	1732
Attorney Docket No.	SIW-024RCE

**METHOD OF PAYMENT** (check all that apply)

Check  Credit Card  Money Order  None  Other (please identify): \_\_\_\_\_  
 Deposit Account Deposit Account Number: 12-0080 Deposit Account Name: Lahive & Cockfield, LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

Charge fee(s) indicated below  Charge fee(s) indicated below, except for the filing fee  
 Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17  Credit any overpayments

**FEES CALCULATION**
**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

**2. EXCESS CLAIM FEES**
**Fee Description**

Each claim over 20 (including Reissues)

**Small Entity**

 Fee (\$) 50  
 Fee (\$) 25

Each independent claim over 3 (including Reissues)

 Fee (\$) 200  
 Fee (\$) 100

Multiple dependent claims

 Fee (\$) 360  
 Fee (\$) 180

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
- 20 =	x	=	

HP = highest number of total claims paid for, if greater than 20.

**Multiple Dependent Claims**

 Fee (\$) \_\_\_\_\_  
 Fee Paid (\$) \_\_\_\_\_

Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
- 3 =	x	=	

HP = highest number of independent claims paid for, if greater than 3.

 Fee (\$) \_\_\_\_\_  
 Fee Paid (\$) \_\_\_\_\_

**3. APPLICATION SIZE FEE**

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
- 100 =	/50	(round up to a whole number) x	=	

**4. OTHER FEE(S)**

Non-English Specification, \$130 fee (no small entity discount)

Fees Paid (\$)

Other (e.g., late filing surcharge): 1501 Utility issue fee 1,400.00

300.00

1504 Publication fee for early, voluntary, or normal ...

30.00

8001 Printed copy of patent w/o color

30.00

**SUBMITTED BY**

Signature	<i>Anthony A. Lauretano</i>	Registration No. (Attorney/Agent)	38,220	Telephone	(617) 227-7400
Name (Print/Type)	Anthony A. Lauretano	Date	September 28, 2006		



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PTO/SB/21 (07-06)

Approved for use through 09/30/2006. OMB 0651-0031  
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

## TRANSMITTAL FORM

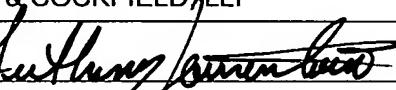
(to be used for all correspondence after initial filing)

		Application Number	10/000,460-Conf. #2302
		Filing Date	November 30, 2001
		First Named Inventor	Masajirou INOUE
		Art Unit	1732
		Examiner Name	M. Colaianni
Total Number of Pages in This Submission		Attorney Docket Number	SIW-024RCE

### ENCLOSURES (Check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please Identify below):  Issue Fee Transmittal Form PTOL- 85B Return Receipt Postcard
Remarks		

### SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	LAHIVE & COCKFIELD, LLP		
Signature			
Printed name	Anthony A. Laurentano		
Date	September 28, 2006	Reg. No.	38,220